

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA , 22313-1450 on 22 May 2006

Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

Jeannie Camara
(Signature of Person Mailing Paper or Fee)

PATENT APPLICATION
Attorney Docket No. OR99-17501

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE PATENT APPLICATION OF)
Vipin Samar) Examiner: Heneghan, Matthew E.
Serial No. 09/544,709) Group Art Unit: 2134
Filing Date: 6 April 2000)
Title: FACILITATING SINGLE SIGN ON BY)
AUTHENTICATED CODE TO ACCESS A)
PASSWORD STORE)

AMENDMENT TRANSMITTAL LETTER

Mail Stop: Amendment
Assistant Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- ☒ Response under 37 C.F.R. § 1.111 to official action mailed 28 February 2006.
- ☐ A petition for extension of time is also enclosed with a fee of \$.00 for a one-month extension for a small entity.
- ☐ Petition for Revival of an Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b), including
 - ☐ check for \$ _____ petition fee under 37 C.F.R. 1.17(m)
- ☐ Information disclosure statement, form 1449 and ___ references.
- ☒ No additional claims fees are required.

☐ An additional fee is required, and is calculated as shown below:

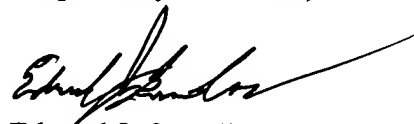
AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDTL FEE
Total Claims		MINUS = 20	0	x \$18 =	
Independent Claims		MINUS = 3	0	x \$78 =	
If Amendment adds multiple dependent claims, add \$260.00					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					\$0.00

- ☐ A check in the amount of \$___ is enclosed.
- ☐ Charge \$___ to Deposit Account No. ___ (Docket No. ___).
- ☒ Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. OR99-17501).

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Respectfully submitted,

By



Edward J. Grundler
Registration No. 47,615

Date: 22 May 2006



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Application Number : 09/544,709
Applicant : Vipin Samar
Filed : April 6, 2000
TC/A.U. : 2134
Examiner : Heneghan, Matthew E.

Confirmation Number: 9115

Docket Number : OR99-17501
Customer No. : 51,067

M/S: Box Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir

In response to the office action of **28 February 2006**, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 16 of this paper.